

CLIENT____:

Cost Item

INTER-MOUNTAIN LABORATORIES, INC.

Invoice F 02897 1186406 - R8 SDMS

Costs of

Services

2506 W. Main Street Farmington, New Mexico 87401 Telephone (505) 326-4737

	Rico Develo Attn: Wayne POB 130 Rico, CO	e Webster	5	·				
	Payment due within	n <u>30</u>	_da	ys after <u>C</u>	08/12/9 Month, Day	2 Year		
	SCHEDULE	OF SERV	/ICE	S PERFO	RMED			
Number of Samples	Туре	Unit price			on	Date Rec'd.	Job Number	Total r Price
2	NPDES	Ex. 4 CBI	1	9415/941	6	8/5		Ex. 4 CBI
	<u> </u>							
				Tax Exem	pt			
Professional Services				Number of Hours	Rate	•	Job Number	Total Price
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Please Pay

Invoice Total \$ 108.80

NOTE: Balances unpaid after due date are subject to a late payment charge of 1.5% per month (18% per year).

Receipt Number

Actual

Cost

15% Fee

Job

Number